

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Dkt. No.	2923-751
		First Named Inventor	Thomas WILCKENS
Declaration Submitted with Initial Filing Submitted after Initial Filing		COMPLETE IF KNOWN	
		Application No.	10/572,795
		Filing Date	March 21, 2006
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: PREVENTION AND TREATMENT OF INFLAMMATION-INDUCED AND/OR IMMUNE-MEDIATED BONE LOSS; the specification of which was filed on March 21, 2006, as U.S. Application No. 10/572,795.

I hereby state that I have reviewed and understand the contents of the above- identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO

I/We hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/504,717	09/22/2003

I hereby appoint the registered practitioner(s) associated with Customer No. **6449** to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to Customer Number **6449**.

I hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Thomas		Family Name or Surname WILCKENS	
Inventor's Signature <i>Thomas Wilckens</i>		Date <i>27/02/2008</i>	
Residence: City Munich	State	Country Germany	Citizenship German
Mailing Address Jakob-Klar-Strasse 7			
Mailing Address			
City Munich	State	Zip 80796	Country Germany

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Ariane		Family Name or Surname VOLKMANN	
Inventor's Signature		Date	
Residence: City Diessen	State	Country Germany	Citizenship German
Mailing Address Langacker 11			
Mailing Address			
City Diessen	State	Zip 86911	Country Germany

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		First Named Inventor	Thomas WILCKENS
Declaration Submitted with Initial Filing Submitted after Initial Filing		COMPLETE IF KNOWN	
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09/24/2008 11:32 FAX 202 783 8031

ROTHWELL, FIGG, ERNST & MANB

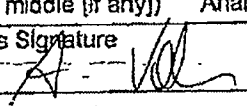
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Application Number(s)	Filing Date (MM/DD/YYYY)
60/504,717	09/22/2003

I hereby appoint the registered practitioner(s) associated with Customer No. 6449 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to Customer Number 6449.

I hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Thomas		Family Name or Surname WILCKENS	
Inventor's Signature		Date	
Residence: City Munich	State	Country Germany	Citizenship German
Mailing Address Jakob-Klar-Strasse 7			
Mailing Address			
City Munich	State	Zip 80796	Country Germany

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Ariane		Family Name or Surname VOLKMANN	
Inventor's Signature 		Date 09.09.2008	
Residence: City Diessen	State	Country Germany	Citizenship German
Mailing Address Langacker 11			
Mailing Address			
City Diessen	State	Zip 88911	Country Germany

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/572,795
Applicant : Thomas WILCKENS
Filed : March 21, 2006
TC/A.U. : 1614
Examiner :
Docket No. : 2923-751
Customer No. : 06449
Confirmation No. : 4240

In Re: PREVENTION AND TREATMENT OF INFLAMMATION-INDUCED
AND/OR IMMUNE-MEDIATED BONE LOSS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

STATEMENT PURSUANT TO 37 CFR §1.48 (a)(2)

I, Ariane VOLKMANN, having an address at Langäcker 11, 86911 Diessen, Germany, hereby declare that I am an inventor of the above-identified application. The error in the inventorship of the above-identified application, in which my name was originally omitted as an inventor, arose without any deceptive intention on my part.

By: A. Vol
Ariane VOLKMANN

Dated: 17 Feb 2008

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CONSENT OF ASSIGNEE

Dear Sir:

Onepharm Research and Development GmbH asserts that it is the Assignee of
U.S. Patent Application No. 10/572,795, filed on March 21, 2006, entitled
PREVENTION AND TREATMENT OF INFLAMMATION-INDUCED AND/OR
IMMUNE-MEDIATED BONE LOSS by way of an Assignment from the inventors,
which Assignment (copy attached) is to be recorded on the same day this Consent is filed
in the U.S. Patent and Trademark Office. Onepharm Research and Development GmbH
hereby consents to the addition of Ariane VOLKMANN as a named inventor of the
10/572,795 application. The undersigned has authority to act on behalf of the Assignee.

Onepharm Research and Development GmbH

By: DR. BERNHARD KUEENBURG 20. DEC. 2007
[typed name] [date]
CEO
[title]



U.S. ASSIGNMENT

IN CONSIDERATION of the sum of One Dollar (\$1.00), and of other good and valuable consideration paid to the undersigned inventor(s) (hereinafter ASSIGNOR) by:

Onepharm Research and Development GmbH
Veterinärplatz 1, Building IA
1210 Vienna
AUSTRIA

(hereinafter ASSIGNEE), the receipt of which is hereby acknowledged, the undersigned ASSIGNOR hereby sells, assigns and transfers to ASSIGNEE all of their right, title and interest to the invention entitled:

Prevention and treatment of inflammation-induced and/or immune-mediated bone loss

for which application for Letters Patent of the United States ASSIGNOR was among the listed inventor, which application was executed on even date herewith unless otherwise indicated below:

filed on: March 21, 2006, Serial No.: 10/572,795

and all Letters Patent of the United States to be obtained therefor on said application or any continuation, division, renewal, substitute, reissue or reexamination thereof for the full term or terms for which the same may be granted.

ASSIGNOR agrees to execute all papers necessary in connection with application and any continuing, divisional, reissue or reexamination applications thereof and also to execute separate assignments in connection with such applications as ASSIGNEE may deem necessary or expedient.

ASSIGNOR agrees to execute all papers necessary in connection with any interference, litigation, or other legal proceeding which may be declared concerning this application or any continuation, division, reissue or reexamination thereof or Letters Patent or reissue patent issued thereon and to cooperate with ASSIGNEE in every way possible in obtaining and producing evidence and proceeding with such interference, litigation, or other legal proceeding.

IN WITNESS WHEREOF, the undersigned inventor has affixed her signature.

WILCKENS, Thomas



(SIGNATURE)

27/02/2008

(DATE)

VOLKMANN, Ariane

(SIGNATURE)

(DATE)

NO LEGALIZATION REQUIRED

U.S. ASSIGNMENT

IN CONSIDERATION of the sum of One Dollar (\$1.00), and of other good and valuable consideration paid to the undersigned inventor(s) (hereinafter ASSIGNOR) by:

Onepharm Research and Development GmbH
Veterinärplatz 1, Building IA
1210 Vienna
AUSTRIA

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Prevention and treatment of inflammation-induced and/or immune-mediated bone loss

for which application for Letters Patent of the United States ASSIGNOR was among the listed inventor, which application was executed on even date herewith unless otherwise indicated below:

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IN WITNESS WHEREOF, the undersigned inventor has affixed her signature.

WILCKENS, Thomas

(SIGNATURE)

(DATE)

VOLKMANN, Ariane

(SIGNATURE)

(DATE)

NO LEGALIZATION REQUIRED

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